

County: Washington  
 SAMARITAN HEALTH CENTER  
 531 EAST WASHINGTON STREET  
 WEST BEND 53095 Phone: (262) 335-4500

Facility ID: 8030

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Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/01): 228  
 Total Licensed Bed Capacity (12/31/01): 228  
 Number of Residents on 12/31/01: 222

Ownership:  
 Highest Level License:  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 220

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		29.7
Supp. Home Care-Personal Care	No					1 - 4 Years		44.6
Supp. Home Care-Household Services	No	Developmental Disabilities	1.4	Under 65	3.2	More Than 4 Years		25.7
Day Services	Yes	Mental Illness (Org./Psy)	28.8	65 - 74	9.0			-----
Respite Care	Yes	Mental Illness (Other)	8.1	75 - 84	31.5			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	42.8	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	13.5	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.3		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	15.8	65 & Over	96.8	-----		
Transportation	No	Cerebrovascular	17.1		-----	RNs		7.6
Referral Service	No	Diabetes	9.0	Sex	%	LPNs		10.0
Other Services	No	Respiratory	7.2		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	10.4	Male	30.6	Aides, & Orderlies		
Mentally Ill	No		-----	Female	69.4			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

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#### Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi- dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	2	2.7	185	0	0.0	0	0	0.0	0	2	0.9
Skilled Care	8	100.0	365	131	92.9	112	0	0.0	0	68	93.2	156	0	0.0	0	0	0.0	0	207	93.2
Intermediate	---	---	---	10	7.1	92	0	0.0	0	3	4.1	148	0	0.0	0	0	0.0	0	13	5.9
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	8	100.0		141	100.0		0	0.0		73	100.0		0	0.0		0	0.0		222	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	10.4	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	4.1	69.4	26.6	222
Other Nursing Homes	23.2	Dressing	10.8	64.0	25.2	222
Acute Care Hospitals	56.0	Transferring	30.2	53.6	16.2	222
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	23.9	57.7	18.5	222
Rehabilitation Hospitals	0.8	Eating	74.3	11.3	14.4	222
Other Locations	9.6	*****				
Total Number of Admissions	125	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	8.1	Receiving Respiratory Care		6.3
Private Home/No Home Health	5.8	Occ/Freq. Incontinent of Bladder	55.4	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	5.8	Occ/Freq. Incontinent of Bowel	36.0	Receiving Suctioning		0.0
Other Nursing Homes	8.3			Receiving Ostomy Care		1.8
Acute Care Hospitals	8.3	Mobility		Receiving Tube Feeding		1.4
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	1.4	Receiving Mechanically Altered Diets		37.8
Rehabilitation Hospitals	0.0					
Other Locations	1.7	Skin Care		Other Resident Characteristics		
Deaths	70.0	With Pressure Sores	7.2	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	2.3	Medications		
(Including Deaths)	120			Receiving Psychoactive Drugs		45.0

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Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Government Peer Group %	Ratio	Bed Size: 200+ Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.5	96.1	1.00	80.2	1.20	82.7	1.17	84.6	1.14
Current Residents from In-County	88.7	87.2	1.02	83.3	1.07	85.3	1.04	77.0	1.15
Admissions from In-County, Still Residing	47.2	54.2	0.87	27.4	1.72	21.2	2.23	20.8	2.27
Admissions/Average Daily Census	56.8	52.0	1.09	94.3	0.60	148.4	0.38	128.9	0.44
Discharges/Average Daily Census	54.5	50.8	1.07	98.8	0.55	150.4	0.36	130.0	0.42
Discharges To Private Residence/Average Daily Census	6.4	7.2	0.88	31.6	0.20	58.0	0.11	52.8	0.12
Residents Receiving Skilled Care	94.1	91.2	1.03	89.7	1.05	91.7	1.03	85.3	1.10
Residents Aged 65 and Older	96.8	95.5	1.01	90.1	1.07	91.6	1.06	87.5	1.11
Title 19 (Medicaid) Funded Residents	63.5	66.5	0.95	71.6	0.89	64.4	0.99	68.7	0.92
Private Pay Funded Residents	32.9	29.0	1.13	19.1	1.72	23.8	1.38	22.0	1.49
Developmentally Disabled Residents	1.4	0.7	1.90	0.8	1.62	0.9	1.44	7.6	0.18
Mentally Ill Residents	36.9	40.1	0.92	35.4	1.04	32.2	1.15	33.8	1.09
General Medical Service Residents	10.4	17.3	0.60	20.3	0.51	23.2	0.45	19.4	0.53
Impaired ADL (Mean)	45.9	46.8	0.98	51.8	0.89	51.3	0.89	49.3	0.93
Psychological Problems	45.0	52.0	0.87	47.7	0.94	50.5	0.89	51.9	0.87
Nursing Care Required (Mean)	7.1	7.2	0.99	7.3	0.97	7.2	0.98	7.3	0.97